

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP		
1	1						51	
2		1					52	
3		2					53	
4		2					54	
5		2					55	
6		2					56	
7		2					57	
8		2					58	
9		2					59	
10		2					60	
11		2					61	
12		2					62	
13		1					63	
14		1					64	
15		1					65	
16		2					66	
17		2					67	
18		2					68	
19		2					69	
20		2					70	
21		2					71	
22		2					72	
23		2					73	
24	1	2					74	
25		2					75	
26		2					76	
27		2					77	
28							78	
29							79	
30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	2						TOTAL IND.	
TOTAL DEP.	46						TOTAL DEP.	
TOTAL CLAIMS	48						TOTAL CLAIMS	